



# **REQUEST FOR PROPOSAL**

## **MIDTERM EVALUATION CONSULTANCY-SEXUAL AND REPRODUCTIVE HEALTH AND ECONOMIC EMPOWERMENT- SUPPORTING OUT OF SCHOOL ADOLESCENT GIRLS' RIGHTS AND SKILLS (SHE SOARS) PROGRAM**

**RFP DOCUMENT # ZMB03 -2610**

**RFP ISSUE DATE: MARCH 29, 2024**

**PROPOSAL SUBMISSION DEADLINE : APRIL 10, 2024**

**CARE ZAMBIA  
9 CHITEMWIKO CLOSE  
KABULONGA,LUSAKA**

**CONFIDENTIAL DOCUMENT**



*PROPERTY OF CARE®*

*REQUEST FOR PROPOSAL  
CONFIDENTIAL*

*PREPARED BY  
CARE®*



## Table of Contents

1.	ABOUT CARE.....	2
2.	GENERAL CONDITIONS AND CLAUSES .....	2
2.1.	CARE’s GENERAL CONDITIONS.....	2
2.2.	CONFIDENTIALITY/ NON-DISCLOSURE.....	3
2.3.	PUBLICITY.....	3
2.4.	LIABILITY.....	3
2.5.	FORCE MAJEURE .....	3
2.6.	ERRORS AND OMISSIONS .....	4
2.7.	OWNERSHIP OF WORK .....	4
2.8.	CONFLICT OF INTEREST.....	4
3.	COMPANY PROFILE & BIDDER’S DECLARATION.....	5
3.1.	COMPANY PROFILE .....	5
3.2.	BIDDER’S DECLARATION .....	6
4.	CONDITIONS AND GUIDELINES FOR SUBMISSION OF PROPOSAL .....	7
4.1.	PROPOSOSAL GUIDELINES.....	7
4.2.	PROJECT PURPOSE AND DESCRIPTION .....	7
4.3.	PROJECT OVERVIEW .....	8
4.4.	PROJECT REQUIREMENTS.....	9
4.5.	PROJECT TIMELINE.....	8
4.6.	EVALUATION CRITERIA.....	11



## **1. ABOUT CARE**

At CARE, we seek a world of hope, inclusion, and social justice, where poverty has been overcome and people live with dignity and security.

This has been our vision since 1945, when we were founded to send lifesaving CARE Packages® to survivors of World War II. Today, CARE is a leader in the global movement to end poverty. We put women and girls in the center because we know we cannot overcome poverty until all people have equal rights and opportunities. In 2019, CARE worked in 100 countries and reached 70 million people with an incredible range of life-saving programs.

To know more about CARE, visit: <https://www.care.org/our-work/>

## **2. GENERAL CONDITIONS AND CLAUSES**

### **2.1. CARE'S GENERAL CONDITIONS**

The enclosed document is not an offer to contract, but a solicitation of a vendor's proposed intent. Acceptance of a proposal in no way commits CARE to award a contract for any or all products and services to any vendor.

CARE reserves the right to make the following decisions and actions based on its business interests and for reasons known only to CARE:

- To determine whether the information provided does or does not substantially comply with the requirements of the RFP
- To contact any bidder after proposal submittal for clarification of any information provided.
- To waive any or all formalities of bidding
- To accept or reject a proposal in whole or part without justification to the bidder
- To not accept the lowest bid
- To negotiate with one or more bidders in respect to any aspect of submitted proposal
- To award another type of contract other than that described herein, or to award no contract;
- To enter into a contract or agreement for purchase with parties not responding to this RFP
- To request, at its sole discretion, selected Vendors to provide a more detailed presentation of the proposal
- To not share the results of the bids with other bidders and to award contracts based on whatever is in the best interest of CARE.



Any material statements made orally or in writing in response to this RFP or in response to requests for additional information will be considered offers to contract and should be included by vendor in any final contract.

## **2.2. CONFIDENTIALITY/ NON-DISCLOSURE**

All information gained by any vendor concerning CARE work practices is not to be disclosed to anyone outside those responsible for the preparation of this proposal. Any discussion by the vendor of CARE's business practices could be reason for disqualification. CARE, at their discretion, reserves the right to require a non-disclosure agreement.

Reciprocally, CARE commits that information received in response to this RFP will be held in strict confidence and not disclosed to any party, other than those persons directly responsible for the evaluation of the responses, without the express consent of the responding vendor.

Finally, the information contained within this RFP is confidential and is not to be disclosed or used for any other purpose by the vendor.

## **2.3. PUBLICITY**

Any publicity referring to this project, whether in the form of press releases, brochures, or photographic coverage will not be permitted without prior written approval from CARE.

## **2.4. LIABILITY**

The selected vendor(s) will be required to show proof of adequate insurance at such time as CARE is prepared to procure the services. The participating vendor will also be required to indemnify and hold harmless CARE for, among other things, any third-party claims arising from the selected vendor's acts or omissions, and will be liable for any damage caused by its employees, agents or subcontractors.

## **2.5. FORCE MAJEURE**

- a. Neither Party shall be responsible for a performance that is delayed, hindered, or is rendered inadvisable, commercially impracticable, illegal, or impossible by a "Force Majeure Event." A Force Majeure event includes, without limitation, an act of nature, a pandemic, emergency, civil unrest or disorder, actual or threatened terrorism, war, fire, governmental action or interference of any kind, power or utility failures, strikes or other labor disturbances, a health warning issued by the Center for Disease Control (or similar agency), any other civil or governmental emergency and/or any other similar event beyond a Party's reasonable control.
- b. The Party that seeks to invoke this Force Majeure provision (the "Affected Party") shall provide the other Party (the "Unaffected Party") with a written notice within ten (10) days of the date the Affected Party determines a Force Majeure Event has occurred.



**2.6. ERRORS AND OMISSIONS**

CARE expects the vendor will provide all labor, coordination, support, and resources required based on the vendor's proposal and corresponding final SOW. No additional compensation will be available to the vendor for any error or omission from the proposal made to CARE. The only exclusions are add-ons, deletions, and/or optional services for which the vendor has received written authorization from CARE.

**2.7. OWNERSHIP OF WORK**

All work created during this evaluation must be original work, and no third party should hold any rights in or to the work. All rights, title and interest in the work shall be vested in CARE.

**2.8. CONFLICT OF INTEREST**

CARE encourages every prospective Supplier to avoid and prevent conflicts of interest, by disclosing to CARE if you, or any of your affiliates or personnel, were involved in the preparation of the requirements, design, specifications, cost estimates, and other information used in this RFP.



### 3. COMPANY PROFILE & BIDDER'S DECLARATION

Bidders are requested to complete this form, including the Company Profile and Bidder's Declaration, sign it and return it as part of your proposal. No alterations to its format shall be permitted and no substitutions shall be accepted.

#### 3.1. COMPANY PROFILE

**Table 4.1.A Previous Work with CARE**

Have you already had previous transactions with CARE?	Yes	No
	<input type="checkbox"/>	<input type="checkbox"/>
If marked <b>"Yes"</b> , please provide the year of the latest transaction with CARE and the requirement that was delivered. <i>(This is to inform everyone that this information is for system checking only. This will not be part of any evaluation process.)</i>		
If you marked, <b>"No"</b> on the table above, please answer the Table 4.1.A. below:		

**Table 4.1.B Other Information**

Item Description	Detail(s)
Legal name of bidder	
Legal Address, City, Country	
Website	
Year of Registration	
Company Expertise	
<b>Bank Information</b> <i>(Please answer below)</i>	
Bank Name:	
Bank Address:	
IBAN:	
SWIFT/BIC:	
Account Currency:	
Bank Account Number:	

Previous relevant experience: 3 contracts				
Name of previous contracts	Client & Reference Contact Details	Contract Value	Period of activity	Types of activities undertaken



--	--	--	--	--

**3.2. BIDDER'S DECLARATION**

Yes	No	
<input type="checkbox"/>	<input type="checkbox"/>	<b>Ethics:</b> By submitting this Proposal/Quote, I/we guarantee that the bidder has not engaged in any improper, illegal, collusive, or anti-competitive arrangements with any competitors; has not directly or indirectly contacted any buyer representative (aside from the point of contact) or gather information regarding the RFP; and has not attempted to influence or offer any type of personal inducement, reward, or benefit to any buyer representative.
<input type="checkbox"/>	<input type="checkbox"/>	I/We affirm that we will not engage in prohibited behavior or any other unethical behavior with CARE or any other party. We also affirm that we have read the general clause and conditions included in this RFP and that we will conduct business in a way that avoids any financial, operational, reputational, or other undue risk to CARE.
<input type="checkbox"/>	<input type="checkbox"/>	<b>Conflict of interest:</b> I/We warrant that the bidder has no actual, potential or perceived Conflict of Interest in submitting this Proposal/Quote; or entering into a Contract to deliver the Requirements. CARE Procurement's Point of Contact will be notified right away by the bidder if a conflict of interest occurs during the RFP process.
<input type="checkbox"/>	<input type="checkbox"/>	<b>Bankruptcy:</b> I/We have not declared bankruptcy, are not involved in bankruptcy or receivership proceedings, and there is no judgment or pending legal issues that could hinder the ability to conduct business.
<input type="checkbox"/>	<input type="checkbox"/>	<b>Offer Validity Period:</b> I/We confirm that this Proposal/Quote, including the price, remains open for acceptance for the Offer Validity.
<input type="checkbox"/>	<input type="checkbox"/>	I/We understand and recognize that you are not bound to accept any proposal you receive, and we certify that the goods offered in our Quotation are new and unused.
<input type="checkbox"/>	<input type="checkbox"/>	By signing this declaration, the signatory below represents, warrants and agrees that he/she has been authorized by the Organization/s to make this declaration on its/their behalf

Supplier Name:	
Title/Designation:	
Company Name:	
Date:	
Signature	





## **4. CONDITIONS AND GUIDELINES FOR SUBMISSION OF PROPOSAL**

### **4.1. PROPOSAL GUIDELINES**

This Request for Proposal represents the requirements for an open and competitive process.

Proposals will be accepted until **3:00 PM APRIL 10, 2024, delivered via email solely to ZMB.Procurement@care.org**, no later than the above specified date.

Any proposals received after this date and time will not be accepted. All proposals must be signed by an official agent or representative of the company submitting the proposal.

If the organization submitting a proposal must outsource or contract any work to meet the requirements contained herein, this must be clearly stated in the proposal. Additionally, all costs included in proposals must be all-inclusive to include any outsourced or contracted work. Any proposals which call for outsourcing or contracting work must include a name and description of the organizations being contracted.

All costs must be itemized to include an explanation of all fees and costs.

Contract terms and conditions will be negotiated upon selection of the winning bidder for this RFP. All contractual terms and conditions will be subject to review by the CARE legal department, and will include scope, budget, schedule, and other necessary items pertaining to the project.

You must respond to every subsection including statement, question, and/or instruction without exception.

Any verbal information obtained from, or statements made by representatives of CARE shall not be construed as in any way amending this RFP. Only such corrections or addenda as are issued in writing by CARE to all RFP participants shall be official. CARE will not be responsible for verbal instructions.

### **4.2. PROJECT PURPOSE AND DESCRIPTION**

CARE is issuing this RFP (Request for Proposal) soliciting qualified bidders to submit proposals intended for the Mid-Term Evaluation Study consultancy for the SHE SOARS Program.

This RFP is an invitation to bid, not an offer of contract. Bidders must submit a response that complies with the minimum requirements contained herein.



**4.3. PROJECT OVERVIEW**

CARE is seeking a consultant to submit proposals intended for the Sexual and Reproductive Health & Economic Empowerment-Supporting Out of School Adolescent girls’ Rights and Skills Program, Mid -Term Evaluation Study.

Requirement & Specs	Qty.	Unit of Measurement	Required Delivery Lead Time	Delivery Address	Contract Period

[Refer to Terms of Reference Provided below this Request for Proposal.]

1.	Payment Terms	30 Days upon Receipt of services or as will be stated in the signed consultancy contract.
2.	Quotation Validity	The quote needs to be valid for 90 days to cover all the days from bidding up to the award process. However, once the contract has been released, it shall be valid for the same coverage as reflected in the requirement above.

**4.4. PROJECT TIMELINE**

All bidders are advised to strictly follow the below timeline as noted.

Any technical questions arising during the preparation of your response to this RFP should be submitted in writing via email to **ZMB.Procurement@care.org** no later than **April 7, 2024**.

Schedule of Activities/ To-do	Date of the Activity/ Deadline of Submission	Responsible	Remarks
<b>RFP Issued</b>	[MARCH 29, 2024]	CARE	
Supplier to notify CARE of intention to participate in bidding	N/A	Supplier	Deadlines must be strictly observed.
Deadline for submission of clarification questions to CARE	[APRIL 07, 2024]	Supplier	Deadlines must be strictly observed.
CARE to answer all clarifications	[APRIL 08, 2024]	CARE	
<b>Supplier’s Deadline of Submission of Proposal</b>	[APRIL 10, 2024]	Supplier	Deadlines must be strictly observed.



Evaluation of Proposal	From [APRIL 12, 2024] to [APRIL 16, 2024]	CARE	
Vendor presentation (if required)	TBA	Supplier	
Finalists selected	[APRIL 18, 2024]	CARE	Upon notification, the contract negotiation with the winning bidder will begin immediately.

**4.5. PROJECT REQUIREMENTS**

**a. Technical Requirements**  
**a.1 Technical Proposal of the Product**

REQUIREMENTS		Provide the necessary details. Attach document or provide separate sheet if needed.
<b>A. Overall Proposal Suitability</b>		
1	Please see the Scope of Work and any other required specifications for this project.	
2	Provide Delivery Lead Time	
3	Provide after-sales service (if applicable)	
4	Ability to provide sample (if applicable)	
5	Provide Warranty Period	N/A
	(Any additional requirement that is deemed necessary for "Previous Works & Awards" Category	

REQUIREMENTS		Provide the necessary details. Attach document or provide separate sheet if needed.
<b>B. Previous Works and Awards</b>		
1	Provide 3 or more client experiences or testimonials (References whose environment, size, and scope are most similar to CARE. Include a summary of the work completed for each account. Include reference contact names, with telephone numbers and email addresses.)	
2	Provide previous records of performance and service.	
3	Provide citations and awards. This encompasses reviewing the citations and awards a vendor has received from other customers and award-giving bodies.	



4	Provide any testimonials, survey response/s from previous buyers and/or partners.	
5	(Any additional requirement that is deemed necessary for "Previous Works & Awards" Category.	

<b>REQUIREMENTS</b>	<b>Provide the necessary details. Attach document or provide separate sheet if needed.</b>
---------------------	--

**C. Technical Expertise and Organizational Experience**

1	Provide 5 Availability of vendor's representatives to call upon and consult with.	
2	Any proof that the vendor has the Ability to render satisfactory service in this instance.	
3	Provide Years of experience in providing the same requirement to other companies.	
4	Provide the latest audited Financial Statement	
5	(Any additional requirement that is deemed necessary for "Technical Expertise and Organizational Experience.	

<b>REQUIREMENTS</b>	<b>Provide the necessary details. Attach document or provide separate sheet if needed.</b>
---------------------	--

**D. Others**

1	Provide any relative requirements which were not mentioned above.	N/A
---	---	-----

**b. VALUE & COST (Financial Requirements)**

(Provide below requirements, payment terms, etc., if there's any) (in Excel File) to be used for your financial bid.

**Compliance with Requirements**

	Yes, we will comply	No, we cannot comply	If marked as "No", please provide counter proposal
Minimum Technical Specifications	<input type="checkbox"/>	<input type="checkbox"/>	
Delivery Lead Time	<input type="checkbox"/>	<input type="checkbox"/>	
Delivery Term (INCOTERMS)	<input type="checkbox"/>	<input type="checkbox"/>	
Warranty Period (if applicable)	<input type="checkbox"/>	<input type="checkbox"/>	
Validity of Quotation	<input type="checkbox"/>	<input type="checkbox"/>	
Payment Terms (30 Days)	<input type="checkbox"/>	<input type="checkbox"/>	
Other Requirements (Please specify)	<input type="checkbox"/>	<input type="checkbox"/>	



#### 4.6. EVALUATION CRITERIA

CARE will evaluate all proposals based on the following criteria. To ensure consideration for this Request for Proposal, your proposal should be complete and include all of the following criteria:

- **Overall Proposal Suitability:** proposed solution(s) must meet the scope and needs included herein and be presented in a clear and organized manner
- **Previous Work and Awards:** Bidders will be evaluated on examples of their work pertaining to the requirement as well as client testimonials and references
- **Technical Expertise and Organizational Experience:** Bidders must provide descriptions and documentation of staff technical expertise and experience. Bidders also need to provide their experiences as an organization which include but not limited to years of experiences, financial stability, expertise, and edge to other competitors.
- **Value and Cost:** Bidders will be evaluated on the cost of their solution(s) based on the work to be performed in accordance with the scope of this project.

CARE will review proposed budgets and pricing after the initial review of the criteria above.\*



**Terms of Reference - National Consultant**  
**for**  
**Mid-Term Evaluation Study**

**Introduction**

CARE International is a global network of independent national organizations working together across more than 100 countries to save lives, end poverty and fight social injustice. CARE is a humanitarian and development non-governmental organization committed to working with people of all genders, especially women and girls, communities, and institutions to have a significant impact on the underlying causes of poverty. CARE seeks to contribute to economic and social transformation, unleashing the power of the most vulnerable women and girls.

**SHE SOARS Project**

Project Name	Sexual and Reproductive Health & Economic Empowerment - Supporting Out-of-school Adolescent girls' Rights and Skills (SHE SOARS)
Funding	Global Affairs Canada
Implementing partners	Restless Development, Youth Coalition, the Center for Reproductive Rights
Project ultimate outcome	Increased enjoyment of health-related human rights by the most marginalized and vulnerable women and girls’ rights holders, particularly out of school adolescent girls in Kenya, Uganda & Zambia.
Type of the study	Cross-sectional mixed methods mid-term evaluation
Proposed key approach and methodology	Quantitative Household coverage survey and Qualitative Gender and Power Analysis: Focus Group Discussions, Key Informant Interviews and Individual In-depth Interviews, Outcome Harvesting, and HMIS data analysis



Purpose of the study	Examine the current knowledge, attitudes and practices related to sexual reproductive health and gender equality among adolescents, particularly out of school adolescents, to inform project improvement.
Study Population	Project participants, particularly out-of-school adolescents, their families, networks and Health Care Providers
Geographic area	Zambia
Proposed start dates	April 29 <sup>th</sup> 2024
Proposed end date	August 30 <sup>th</sup> 2024

The project aims to increase the enjoyment of health-related rights on the part of extremely vulnerable and marginalized women and girls, particularly out-of-school adolescent girls between 10 and 19 years of age in Chadiza, Kasenengwa and Mambwe districts of Eastern Province in Zambia. The project has provided training and support for educators and health care providers to ensure that adolescents have access to comprehensive sexuality education (CSE) and provided CSE directly through skills and training packages for youth groups in all three project countries. The project is working with local groups, health care providers, and government ministries to build capacity and improve access to high-quality, evidence-based comprehensive sexual and reproductive health (SRH) services for out-of-school adolescents in an inclusive and adolescent-friendly environment. The project was informed by consultation with out-of-school and at-risk adolescents in the project countries and continue to work with local organizations and governments to advocate for sustainable transformations in the social, economic, and legal environments so that adolescents, particularly adolescent girls, can more easily access sexual and reproductive health (SRH) services and exercise their sexual and reproductive health rights.

Working in partnership with Restless Development, the Youth Coalition for Sexual and Reproductive Rights, the Center for Reproductive Rights and through partnerships with local Women’s Rights, and Youth-Led Organizations, the project puts out of school adolescent girls’ needs and rights at the center of activities and is anticipated to directly support 27,586 (75%) out of school adolescent girls and 7,356 (20%) out of school boys (10-19 years) across the target communities in Zambia.



The project will increase the enjoyment of health-related human rights on the part of extremely vulnerable and marginalized women and girls, particularly out of school adolescent girls aged between 10 and 19 years old in Kenya, Uganda and Zambia through three interconnected pillars: (1) increased equitable use of SRHR health services by diverse groups of women, adolescent girls, and children's rights holders, particularly out-of-school adolescent girls; (2) improved provision of gender-and adolescent-responsive, inclusive and accountable health services by health care providers for diverse groups of women, adolescent girls, and children's rights holders, particularly out-of-school adolescent girls; and, (3) improved effectiveness of key stakeholders, particularly women's and girls' rights organizations to advocate for evidence-based, accountable and equitable adolescent SRHR policies, legal frameworks and services.

Project activities include: 1) providing training and support for educators and health care providers to ensure that adolescents have access to comprehensive sexuality education (CSE), and providing CSE directly through skills and training packages for youth groups in all three project countries; 2) working with local groups, health providers, and government ministries to build capacity and improve access to sexual and reproductive health and rights (SRHR) services for out-of-school adolescents; 3) financial and capacity support to Women's Rights Organizations and Youth-Led Rights Organizations to conduct advocacy on SRHR to influence legal and policy change; 4) deep community engagement and accompaniment to transform social and gender norms that are barriers to adolescent girls' and boys' rights, including the right to bodily autonomy.

In Year one of the project, a baseline study was conducted with the purpose to:

- 1) Establish baseline values for all indicators for the SHE SOARS project as set out in the Performance Measurement Framework (PMF)
- 2) Examine the knowledge, attitudes and practices related to sexual reproductive health and gender equality among adolescents, particularly out-of-school adolescents, to inform project implementation.
- 3) Contribute to the evidence base surrounding Gender Equality and Sexual and Reproductive Health outcomes for adolescents.
- 4) Identify programmatic priorities and approaches through key informant interviews with stakeholders such as government staff, community leaders, health care providers and staff from other sexual and reproductive health rights projects.



The project has been running for the past three years since 2021. It is against this background that a Mid-Term Evaluation (MTE) will be conducted in the fourth year of the project.

### MTE Scope

The proposed scope of the mid-term evaluation will involve undertaking a cross-sectional mixed methods approach:

1. A coverage survey at household level that targets households with at least one female adolescent member (15-19 years old), uses a structured questionnaire about sexual and reproductive health and gender equality and allows for sex, age and in-school/out of school disaggregated quantitative data.
2. A qualitative gender and power analysis study that provides contextual information about beliefs and behaviors related to sexual and reproductive health and gender equality among adolescents, particularly out-of-school adolescents, their families, and networks. Focus Group Discussions (FGDs) will also address how different interventions (peers groups, Youth Savings and Loans Associations (YSLAs), Community Score Card (CSC), Social Analysis and Action (SAA) contributed to other project outcomes such as women's empowerment and access to health services.
3. Key Informant Interviews with intermediaries and key stakeholders to document successes, challenges, and lessons learned, in particular regarding:
  - a. Youth engagement
  - b. Utilization of knowledge by Youth Led Organizations (YLOs) and Women Rights Organizations (WROs)
  - c. Partnership and consortium management
  - d. Safeguarding

### Proposed Research Questions

The following are the key questions to be addressed by this multi-faceted study, taking into account process and outcome evaluation requirements:

### **Process Evaluation**

- What is working well? What is working less well? Documenting successes, challenges and lessons learned in terms of implementation and sustainability, for example uptake of project's activities, institutionalization of approaches at Health Facility, functionality of

youth structures, Feedback and Accountability Mechanisms (mainly using Key Informant Interview [KII] guides)

- Pillar 1100: Community engagement
  - Peer groups: girls clubs, Role Model Boys (RMB)
  - Community Score Card
  - YSLA and Inter-generational Dialogues (IGAs), skilling programs
  - Gender transformative activities: SAA, IGDs, social norms for gatekeepers
- Pillar 1200: Health Systems strengthening
  - Training and mentoring of (Health Care Providers) HCP (values and biases)
  - Management teams, village health and Health Facility committees, Technical Working Groups (TWGs)
  - Community Health Volunteer (CHV) and outreach
- Pillar 1300: Advocacy
  - Capacity building of WRO and YLOs
  - Convenings, movements, forums

### **Outcome evaluation:**

- Pillar 1100:
  - What are the current knowledge, attitudes and practices related to ASRHR among adolescents, particularly out-of-school adolescents? How has it changed since the baseline? (Household coverage survey targeting project participants)
    - 1100 %/total of girls 15-19 making their own informed decisions regarding sexual relations, contraception, and reproductive health care (to be addressed by GPA focus groups)
    - 1110 %/total of girls and boys 15-19 who know how to access SRHR services
    - 1110 %/total of adolescent girls who have high capability to perform economic activity (attending school or TVCE)
    - 1120 %/total of women, men, adolescent boys and girls who report improved communications between adolescents and parents about ASRH

- 1120%/total of women, men, adolescent boys and girls who report gender-equitable attitudes toward women's and girls' sexual agency
  - % of adolescents that have accessed ASRH services
  - 1200 %/total of adolescent girls aged 15-19 using modern contraception.
- How has the enabling environment changed to allow the modified behavior without sanctions considering intersectional factors – in/out of school, adolescent mothers? Are there any unintended consequences? (Gender and Power Analysis)
  - How has agency, control and decision making over adolescents' bodies, gender power relations, and harmful gender social norms transformed as a result of the project's interventions (peers groups, YSLA, skilling program, CSC, SAA)? (GPA)
  - Have aspirations regarding adolescent girls' lives changed in the community since the baseline study? Is there any indirect attribution to the project?
  - Has the CHE model helped adolescents access health products conveniently (time, affordable and proximity)?
  - Has the presence of CHEs and the products improved health - seeking behaviors among adolescents?
  - Has the CHE model helped adolescents earn extra income?
- Pilla 1200:
    - How do management teams and village committees perceive their capacity to coordinate ASRHR services? To which extent are the recommendations from supportive supervision put into practice? What is the level of youth engagement? What is the status of environmental health aspects? (use KIIs and direct extraction of HMIS data)
      - 1130 #/total and %/total of all Community-level health advisory structures with meaningful youth involvement
      - 1210 #/total and %/total of HF with youth friendly services
      - 1220 #/total and %/total of HF with full availability of contraception methods on the day of assessment (HMIS)
      - 1220 #/total and %/total of gender responsive supportive supervision visits per health facility.

- 1230 # of adolescent girls and boys provided with SRH information and services through SRH outreach (HMIS)
  - 1212 #/total of HCP who receive mentoring visits
  - 1232 #/total of HFs equipped to deliver adolescent and gender responsive SRH services
- Pillar 1300:
    - How do WROs and YLOs perceive the project contribution to their capacity to hold national, district and local duty-bearers accountable for adopting and/or implementing comprehensive ASRHR policies and services? (Outcome harvesting - KIIs)
      - Knowledge on engagement with accountability mechanisms.
      - Knowledge on legal and policy research and analysis.
      - Knowledge on evidence based legal and policy advocacy.
      - Engaging with new accountability mechanisms. How useful the knowledge was in their engagement with accountability mechanisms.
      - Undertaking legal and policy research and analysis and identifying legal and policy priorities
      - Developing multi-year national legal and policy advocacy strategies
      - Influencing SRHR standards and services
      - Who are the stakeholders (duty-bearers, influencers) that drove the changes that were achieved? What explains their relative influence/contribution?
      - What do the outcomes we attained say about the impact of our intervention strategies (what works, what seems to have less influence)?
    - How do WROs and YLOs perceive the project contribution to their level of regional coordination? (Outcome harvesting & advocacy logs)
      - 1300 #/total of supported WROs & YLOs reporting increased ability to engage in networks, alliances, platforms, and movements.
      - 1300 #/total targeted policies, laws, standards, and services that were influenced by interventions (such as



advocacy, consultation, collaborative drafting, briefings) from women’s rights organizations, networks, and alliances.

- How have implementing partners, local partners internally mainstreamed gender throughout project implementation and institutional practices? (are there gender sensitive staff recruitment processes? availability of gender responsive budgets, strengthening internal PSHEA policies etc) (KIIs)

**Approach and Methodology**

In Kenya, Uganda and Zambia, the mid-term evaluation data collection will take into consideration the following aspects:

- Data source (primary and secondary) adaptation of provided data collection tools for country context.
- Data collection in the targeted communities in the respective Countries.
- Data analysis and interpretation of quantitative data.
- Data analysis for the qualitative Gender and Power Analysis data.
- Outcome harvesting of the progress being recorded by Project’s Women Rights Organizations and Youth Led Organizations.

**Household Coverage Survey:**

The coverage survey will follow the John Hopkins University (JHU) RADAR guidance on the following link (<https://www.radar-project.org/coverage-survey>) and DHS methodology on the link below: (<https://dhsprogram.com/methodology/Survey-Types/DHS-Methodology.cfm>). The consultant will conduct data collection on randomly selected households with at least one female adolescent member (15-19 years old) in areas where the project is being implemented. In each household up to 4 members will be interviewed if present: a female adolescent, male adolescent, female adult and male adult. The interview with each member should last less than 1 hour. The questionnaire will contain social-demographic questions, sexual reproductive health questions and gender equality questions sufficient to provide data for calculating project indicators as described in the Performance Measurement Framework (PMF).

**Deliverables:**

The National Consultant will be responsible for the following deliverables:

Activity	Deliverable	Approximate number of days
----------	-------------	----------------------------

Develop Inception report	Inception report, with a field plan	<b>2 Days</b>
Design Sampling Strategy	Sample Design and strategy for approval	<b>3 Days</b>
Review, adaptation and translation of data collection tools in Local language	Final Data Collection Tools	<b>5 Days</b>
Development of study protocols for Expedited Ethics Review	Study protocols	<b>5 Days</b>
Configuration of study protocols on a digital platform (Kobo)	Link to the tools	<b>2 Days</b>
Selection and Training of Enumerators	Training Manual and PowerPoint Slides	<b>5 Days</b>
Data Collection	Raw dataset with dictionary and syntax	<b>15 Days</b>
Verbatim Transcription of qualitative data	Qualitative Transcripts	<b>10 Days</b>
Preparation of the Mid-Term Evaluation Report (H/H Coverage, GPA and Outcome Harvesting report.	MTE (H/H coverage, GPA and Outcome Harvesting) Report	<b>10 Days</b>
Facilitate results' sense-making, validation and dissemination meetings	Presentations	<b>3 Days</b>
<b>Total Number of Days</b>		<b>60 Days</b>

### Qualitative gender data collection:

- Focus group discussions guided by semi-structured open-ended questions will examine adolescent girls and boys in and out of school, and women and men's beliefs and behaviors in relation to gender and sexual reproductive health. The National Consultant will conduct FGDs, IDIs and KIIs in the respective countries. It is expected that the National



Consultant will work with Qualitative Data Collectors trained specifically in qualitative data collection and with proven past experience that are fluent in local language(s) and in English. The data collection tools will be provided and can be adapted to the local context.

**Deliverables:**

- FGD/KII/IDI guides in English and translated into local language
- Selection and training of facilitators on do no harm, obtaining consent, confidentiality, FGD/KII methodology and FGD/KII guides
- Conduct and supervise FGDs/KII/IDI
- Taped/recorded voice conversations of the FGDs/KII/IDI
- Verbatim transcription and translation of documents/files of the FGDs/KII/IDI
- Report containing data collection procedures and limitations, qualitative data from Key Informant Interviews, (FGD, KII and IDI transcripts)



Proposed Timelines

Activities	Responsible	Dec 23	Jan 24	Feb 24	Mar 24	Apr 24	May 24	Jun 24	Jul 24	Aug 24	Sep 24	Oct 24	Nov 24	Dec 24	Jan 25	Feb 24	Mar 25	Apr 25
Identify thematic areas via survey	Lason/Clarissa	█																
Define MTE scope of work	Lason/Clarissa		█															
Develop MTE TORs and draft tools and widely share with Country Teams	Lason/Clarissa			█														
Country Teams Advertise MTE TORs	Lason/Clarissa/John/Frances /Christabel				█													
Engage National Consultants	John/Frances/Christabel					█												
Proposal/Inception report submissions and ethics clearance	National Consultants						█											
Data Collection process	National Consultants							█	█	█								
Data Analysis and report preparation	National Consultant										█	█						
Sense making of preliminary MTE results	National Consultant												█					
Final Report	National Consultant													█				
Dissemination of MTE results at the March 2025 All-Partners Conference	John/Frances/Christabel																█	█



## **Roles and Responsibilities**

The mid-term evaluation will be conducted in Chadiza, Kasenengwa and Mambwe districts of Eastern Province in Zambia managed by a Principal Investigator (PI) – SHE SOARS Regional MEAL Advisor (based in Lusaka, Zambia), with technical support from the SHE SOARS MEAL Specialist Canada. The PI will manage and oversee the Consultant who will be involved in day-to-day activities of the evaluation: data collection, data analysis and report writing. The specific roles and responsibilities are outlined below:

### **Principal Investigator – Regional MEAL Advisor based in Zambia.**

- Overall coordination and management of the mid-term evaluation study in the three countries
- Participate in the hiring of National Consultants
- Coordinate Ethics approval process.
- Test of digital platform for data collection
- Attends training of Enumerators where possible
- Conducts supervisory visits during data collection to ensure quality and consistency across countries.
- Assist in random sampling for the households and communities.
- Ensure that evaluation deadlines are met.
- Support results sense-making, validation, and dissemination sessions.
- Archives mid-term evaluation raw data

### **SHE SOARS MEAL Specialist - CARE Canada responsible for:**

- Providing technical support on methodology, particularly sample design and calculation of indicators
- Participate in the hiring of National Consultants
- Input into questionnaire and interview guides
- Review survey training materials
- Test of digital platform for data collection
- Provide report template

### **National Consultant**

- Responsible for day-to-day management and coordination of evaluation activities
- Prepares research protocol.
- Responsible for translation of study tools and consent forms
- Applies for expedited ethical approval.
- Prepares the inception report and training manual.
- Leads on recruitment of enumerators and facilitators.

- Leads on training of enumerators and facilitators.
- Responsible for ODK/Kobo program
- Undertakes preparation and logistics for data collection.
- Supervision of data collection, data entry, data cleaning, transcriptions, and translation.
- Undertakes data analysis and provides raw datasets and transcripts to the PI in time.
- Prepares report of data collection procedures and limitations with tabulation of all questions
- Compile household survey, gender power analysis and Outcome Harvesting report.
- Facilitate the sense-making, validation, and dissemination of mid-term survey results with varied stakeholders.

### **Ownership and Disclosure of Data/Information**

All documents, project designs, drawings, data, and information shall be treated as confidential and shall not be shared without the written approval of CARE or be made available to any third party. In addition, the consultant(s) formally undertakes not to disclose any parts of the confidential information and shall not, without the written approval of CARE, be made available to any third party. The utilization of the reports, training materials and protocols is solely at the decision and discretion of CARE. All the documents containing both raw data/materials provided by CARE and final report, both soft and hard copies are to be returned to CARE upon completion of the assignment. All documentation and reports written as, and as a result of the research or otherwise related to it, shall remain the property of CARE. No part of the report shall be reproduced except with the prior, expressed and specific written permission of CARE.

### **Additional Consultant qualifications to the ones on RFP**

The interested Consultant should have a long history of experience in public health and sexual reproductive health rights with preferred background and experience in gender. He/She must have the following skills and qualifications:

- PhD/Msc level is Preferable.
- Expertise on quantitative and qualitative data collection and analysis
- Sound knowledge and practical experience in fields of social sciences, gender, and policy analysis.
- Proven ability to manage large teams of Enumerators.
- Experience with using digital data collection for similar surveys.



- Experience designing databases, performing data entry and data analysis.
- Ability to supervise and manage data entry for quality control.
- Practical experience of using statistical methods with SPSS or STATA
- Experience in designing questionnaires and data collection using mobile technology (ODK or KoboCollect).
- Desired experience with qualitative software such as Nvivo or Atlasti.

### **Proposal Submission Requirements**

A **technical** and **financial** proposal on the basis of the above RFP and Terms of Reference (ToR) is requested from individual Consultants or Consulting firms. The proposal should contain:

- A technical proposal with a detailed plan of action for field work indicating staff days required.
- Specific roles and responsibilities of the team leader, supervisory chain, and other core members of the evaluation team
- Schedule of key activities
- Detailed Financial Proposal in local currency (ZMW)
- Updated CV of Team Leader and other core members of the Evaluation Team
- A profile of the consulting firm (including a sample report if possible)
- Certificate of Incorporation, Valid Tax Clearance Certificate.

### **Proposal Submission Timeline**

Interested applicants should **electronically** submit **both** Technical and Financial proposals **by Wednesday 10<sup>th</sup> April 2024** to **ZMB.Procurement@care.org**

The Country Director  
CARE International in Zambia  
Plot 7, Chitemwiko Close, Kabulonga  
P.O Box 36238  
Lusaka, Zambia